



City of Bridgeport - Office of Youth Services
2017 Summer Youth Employment Program
APPLICATION FOR PARTICIPATION - MUST BE A BRIDGEPORT RESIDENT
To qualify you must be age 14 by July 1, 2017 and no older than 21.
Number of positions granted based on available funds.
DEADLINE: June 2, 2017

1. Applicant's Last Name (please print)		First Name (please print)		Middle Initial
2. Applicant's Street Address (No P.O. Box)		City	Zip	Female <input type="checkbox"/> Male <input type="checkbox"/>
3. Social Security Number	4. Student ID #:	5. Home Phone #: Cell #:	6. Date of Birth / /	7. Age
8. EMAIL : _____				
9. Ethnicity (please check all that apply) <input type="checkbox"/> White <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Hispanic/Latino Other _____				
10. Household Income <u>All Sources</u>		Please circle for each source listed		
1.	\$	Weekly	Biweekly	Monthly Other
2.	\$	Weekly	Biweekly	Monthly Other
11. Family Size - # of people living in your house Adults 18 years old and over _____ Under 18 _____				
12. Are you being cared for by a foster family? Yes _____ No _____				
13. U.S. Citizen? Yes _____ No _____ Resident Alien? Yes _____ No _____				
14. Medical needs if any: _____				
15. In case of an emergency, please notify: _____ Phone #: _____ Relation to applicant: _____ Cell #: _____				
16. Educational Status: (check one) _____ In school _____ Did not complete school / highest grade completed: _____				
17. Name of school currently attending: _____ Guidance Counselor _____				
18. Have you previously worked for a Summer Youth Employment Program? Yes ___ No ___ What year? _____				

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I hereby certify that information provided above is true and correct to the best of my knowledge.

Applicant's Signature

Parent/Guardian Signature if applicant is under 16

Applications will not be accepted without complete documentation, including signature of parent if applicant is under 16 years old.

Please return the application with **COPIES (NO ORIGINALS)** of **ALL** the following documents:

1. **COPY** of current Report Card (*grades and teacher comments are very important to selection process*)
2. **COPY** of Proof of Residency (*such as a piece of mail addressed to you at your home*)
3. **COPY** of Social Security Card
4. **COPY** of Photo I.D. (*if not in school provide CT State ID*)
5. **COPY** of Birth Certificate (*not hospital certificate*) or Passport
6. **COPY** of Proof of Household Income (either a copy of 2016- 1040 Income Tax Filing, State Budget Sheet, Social Security Statement, unemployment certificate etc. for all household members) (*Not used for determining eligibility, but may be used to solicit public & private funds*)

If you have any questions or are unable to obtain the documentation needed for these categories, please feel free to contact the Office of Youth Services at (203) 576-7252.

BASED ON THE AVAILABILITY OF FUNDS, employment begins on July 5, 2017 for five weeks through August 4, 2017. Youth chosen for employment will work an average of 4 hours per day, 5 days per week. Positions may be extended if funding permits. Certain positions may require additional hours and Saturdays. Please return **COMPLETED APPLICATION** (incomplete or mailed applications will not be accepted) to:

Office of Youth Services, City Hall , 45 Lyon Terrace, Room 301

Office hours 9 am -5 pm

Applications Due By June 2, 2017

Mandatory training sessions on Thursday, June 29th and Friday, June 30th from 9:00am-12:00pm.

**** OFFICE USE ONLY ****

15. Recommended for employment? Yes No		16. Interests: Camp ____ Office ____ Outdoor ____ Retail ____ Health Care ____ Business ____	
17. If yes, Worksite assignment:			
18. Brief statement of duties (e.g. building maintenance - landscape maintenance)			
19. Hours/Week	20. Wage/Hour	21. Start Date	22. End Date
23. Reason for termination of participant (quit or completed)			
Signature of Intake Official			Date